

ESAT DATA VALIDATION EVALUATION CHECKLIST

Contract # EP-W-06-016

Task Order #: 0042 TDF #: _____ Revision #: 0 Case/DAS #: R33917
 Site Name: Dimock SDG #: 480-16217-1
 Analysis Type: Organic SOW #: SW-846 Method 8015B
 Reviewer: Ex. 4 - CBI
 CLP Laboratory Code: TAL BUF

EPA CLP TPO: Jennifer Feranda

Region: 2

EPA RPM: _____

cc: _____

Number of hours spent on review: _____

Number of samples: 13

Validation Type: M3

Flat File Required Yes ☐ No ☐

Date submitted to EPA: _____

| <u>CRITERIA</u> | <u>YES</u> | <u>NO</u> | <u>COMMENTS</u> |
|--|------------|-----------|-----------------|
| Format according to Region III protocol | _____ | _____ | _____ |
| Clarity of report | _____ | _____ | _____ |
| Qualifiers applied correctly | _____ | _____ | _____ |
| Consistency between narrative and data summary form(s) | _____ | _____ | _____ |
| Error-free transcription | _____ | _____ | _____ |

| <u>EFFICIENCY OF CONTRACTOR</u> | <u>YES</u> | <u>NO</u> | <u>COMMENTS</u> |
|---|------------|-----------|-----------------|
| Approval recommended for current submission | _____ | _____ | _____ |
| Time spent on review is reasonable | _____ | _____ | _____ |
| Technical Evaluation | _____ | _____ | _____ |
| EPA Oversight | | | |

ESD OVERSIGHT

| DATES | EPA | Oversight _____ | ESAT |
|---------------------|-------|-----------------|-------|
| Received at EPA | _____ | | |
| Oversight assigned | _____ | | |
| Oversight received | | _____ | |
| Oversight completed | | _____ | |
| Feedback given | _____ | | |
| Mailed to RPM | | | _____ |